ATTORIEV'S DOCKST NUMBER
SCH-1832

				3CH-1832
	FULL NAME	PAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
2	OF INVENTOR	MENRAD	Andreas	SOCURE GIVEN NAME
0	RESIDENCE & COTIZENSHIP	ORANIENBURG	STATE OF FOREIGN COUNTRY GERMANY	COUNTRY OF CITIZENSHIP GERMANY
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0 2	RESIDENCE & CTITZENSHIP	BERLIN STREET BERMAN STR 53	STATE ON POREIGN COUNTRY GERMANY	COUNTRY OF CITIZENSHIP GERMANY
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2	FULL NAME OF INVENTOR	FAMILY NAME KOPPLITZ	FIRST GIVEN NAME Marcus	SECOND GIVEN NAME
0 3	RESIDENCE &	CITY BERLIN	STATE OR FOREIGN COUNTRY GERMANY	COUNTRY OF CITIZENSHIP GERMANY
	POST OFFICE ADDRESS	STREET Heinrich-Heine-Str. 24	BERLIN	STATE & ZIP CODE/COUNTRY D-10179, GERMANY
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2	FULL NAME FOR INVENTOR	PAMILY NAME BAHR	FIRST GIVEN NAME Inke	SECOND GIVEN NAME
0 5	RESIDENCE & CITIZENSHIP	CITY BERLIN	STATE OR FOREIGN COUNTRY GERMANY	COUNTRY OF CITIZENSHIP GERMANY
	POST OFFICE ADDRESS	STREET Paul-Lincke-Ufer 25a	CITY BERLIN	STATE & ZIP CODE/COUNTRY D-10999, GERMANY
2	FULL NAME OF INVENTOR	PAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
0 6	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE &	CITY	STATE OR POREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	STREET	ату	STATE & 21P CODE/COUNTRY

## Combined Declaration for Patent Application and Power of Attorney (Continued)

ATTORNUY'S POCKET NUMBER
SCH-1832

	FULL NAME OF INVENTOR		FIRST GIVEN NAME	SECOND GIVEN NAME	
2	RESIDENCE A	ary			
8	CITIZENSHIP		STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY	
2	FULL NAME OF INVENTOR	PAMILY NAMELEC 1 7 ZUUT CO	PIRST CHIVEN NAME	SECOND GIVEN NAME	
9	BESIDENCE &		STATE OR POREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
1 0	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
.t.	POST OFFICE ADDRESS	STREET	CITY	STATE & ZIP CODE/COUNTRY	
2	PULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
1	KESIDENCE & CITIZENSHIP	ary	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	СПУ	STATE & ZIP CODE/COUNTRY	
2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME	
2	RESIDENCE &	CITY	STATE OR POREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	ADDRESS	STREET	CITY	STATE & ZIP CODE-COUNTRY	

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent assuing thereon.

AMOSCA Mensal	30/11/01	SIGNATURE OF INVENTOR 207	DATE
SIGNATURE OF INVENTOR 202	30. Nov. 01	SIGNATURE OF INVENTOR 308	DATE
Charas Copy is	30. M. 01	SIGNATURE OF INVENTOR 318	DATE
Unale Eque	3.12.01	SIGNATURE OF INVENTOR 210	DATE
and the second s	DATE 3.12.61	SIGNATURE OF INVENTOR 211	DATE
ignature of inventor 206	DATE	SIGNATURE OF INVENTOR 212	DATE